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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/783,774
Filing Date	02/20/04
First Named Inventor	Mieko Seki
Art Unit	
Examiner Name	
Attorney Docket Number	20014.007

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Kiyotaka Sato		
Signature	<i>Kiyotaka Sato</i>		
Date	25 Aug 2004	Telephone	011-81-465-80-2455

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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